



Rowan County Health Department – Environmental Health Division
402 N Main Street, Suite 106 – Salisbury, NC 28144-4341

MIGRANT HOUSING INFORMATION FORM

Your Name: _____

Company Name: _____

Mailing Address: _____

Daytime Phone Number: _____

Email Address: _____

On or after what date would you prefer Rowan County Environmental Health to perform an inspection? _____

Address and/or location of the migrant home: _____

Number of migrant workers expected: _____

Number and type of housing provided:(Ex. 1-House and 1-Manufactured Home)

Water supply: Well_____ Municipal_____

Other(specify)_____

Wastewater Facilities: On-Site Septic Tank System_____ Municipal_____

Other(specify)_____

Signature of Owner

Date